

STATE OF TENNESSEE  
COUNTY OF SHELBY

KIMBERLY HARRISON ,BEING SWORN, DEPOSES THAT SHE/HE IS EMPLOYED BY  
METHODIST HEALTHCARE AND THAT SHE/HE IS AUTHORIZED  
TO MAKE THIS AFFIDAVIT, THAT THE AMOUNT OF THE ACCOUNT IS TAKEN  
FROM THE ORIGINAL BOOKS OF ENTRY OF THE CORPORATION AND THAT  
UPON INFORMATION AND BELIEF THE BALANCE OF

CLIENT NAME	ACCOUNT#	SERVICED	DEBT AMOUNT	REMAINING BALANCE
METHODIST HEALTHCARE SOUTH	ER08961088	03/15/04	100.00	100.00
METHODIST HEALTHCARE UNIVERSITY	IP38387691	07/02/07	12019.00	12019.00

SHOWN DUE IS TRUE AND CORRECT, THAT THE SAID BALANCE WITH INTEREST  
THEREON IS JUSTLY DUE AND OWING TO METHODIST HEALTHCARE FROM  
CARRIE M BARRETT AND THAT NO PAYMENTS HAVE  
BEEN MADE EXCEPT THOSE PRIOR TO THIS AFFIDAVIT.

TOTAL DUE 12119.00

AFFIANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS 22 DAY OF  
October, 2009.

Marilyn Parkes  
MY COMMISSION EXPIRES \_\_\_\_\_

OMMISSION EXPIRES:  
March 17, 2010

